## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee		Date
Michael Markarian		M M / D D / Y Y Y Y Y 1 1 4 2 0 1 0
Mailing Address 1206 Maryland Avenue, NE		Amount
City St	ate Zip Code	11.68
Washington D	-	
Purpose of Expenditure	Category/	Office Sought: X House State: PA
Staff Time	Туре	House Senate District: 06
Name of Federal Candidate Supported or Opposed by Expo Jim Gerlach	enditure:	Check One: X Support Oppose
Oalanday Van Ta Data Bar Floritar		Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	14330.36	2010 Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Scott Tucker		M M / D D / Y Y Y Y
Mailing Address		10 14 2010
1435 N Street NW #205		Amount
	ate Zip Code	4.42
Washington D	C 20005	
Purpose of Expenditure	Category/	Office Sought: X House State: PA
Staff Time	Туре	House Senate
Name of Federal Candidate Supported or Opposed by Exp	enditure:	President District: 06
Jim Gerlach		Check One: X Support Oppose
		Disbursement For: Primary X General
Calendar Year-To-Date Per Election for Office Sought	14334.78	2010 Cther (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Scott Tucker		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address		Amount
1435 N Street NW #205		
,	ate Zip Code	17.70
Washington D	C 20005	
Purpose of Expenditure	Category/	Office Sought: X House State: AZ
Staff Time	Туре	House Senate District: 07
Name of Federal Candidate Supported or Opposed by Exp	enditure:	President District.
Raul M Grijalva		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary X General
for Office Sought	17.70	Other (specify)
(a) SURTOTAL of Itomized Independent Expanditures		33.80
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTALof Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		. L